

## New Hampshire Board of Nursing

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**OFFICIAL  
ON-LINE  
NEWLETTER  
PUBLICATION  
OF  
THE  
NEW HAMPSHIRE  
BOARD OF NURSING**

*HAPPY, SAFE FALL*



*NEW HAMPSHIRE BOARD OF NURSING*

#### **PUBLIC RULES MEETING**

December 20, 2012  
11:00 a.m.  
21 S. Fruit St., Room 100  
Concord, NH 03301

<http://www.nh.gov/nursing/rules/index.html>

**Contact Us:**

21 S. Fruit St., Ste 16

Concord, NH 03301

603-271-2323 (Nursing)

603-271-6282 (LNA)

[www.nh.gov/nursing](http://www.nh.gov/nursing)

The mission of the Board of Nursing is to safeguard life, health, and the public welfare of the people of this state and in order to protect the people of the state of New Hampshire from the unauthorized, unqualified and improper application of services by individuals in the practice of nursing.

**Board Members**

Robert A. Duhaime, MBA, RN  
*Chairperson*

Karen L. Baranowski, DNSc, RN  
*Vice-Chairperson*

Ann Finn-Waddell, LPN

Harley Featherston,  
Public Member

Beth Fersch, LPN

Nora Fortin, RN

Tracey Collins, MSN, CNRN, BC

Kitty Kidder, APRN, MSN, APRN-CS

Brenda Libby, LNA

Cynthia Smith, LNA

James Kuras, Public Member

**FROM THE EXECUTIVE DIRECTOR****by Denise Nies, MSN, RN, BC**

Happy Fall to Everyone! The leaves are changing and cooler temperatures prevail. I hope that the summer months provided some fun and relaxation.

The Board of Nursing held its Strategic Planning Meeting in September and addressed a number of topics and voted to implement a number of processes.

First, office review of Criminal Background Checks (CBCs) will now have a standardized approach. We have adopted and modified guidelines from another state that will provide guidance on what applications can be reviewed and approved through the Board of Nursing Office and what applications require a review by the Board of Nursing. The guidelines will be placed on the website for easy reference under the category of "Discipline".

Second, the Board voted to approve use of a guideline that addresses disposition with disciplinary cases. This guideline will be used by the Board investigator and Board members when cases are reviewed to determine action or no action taken on a license.

Third, a Regulatory Action Pathway, provided by the National Council of State Boards of Nursing (NCSBN) will also be used with investigations of clinical practice to determine if there was Error or Deliberate Harm and if there is the presence of a System's Failure. Predicated on the work done on Just Culture, this algorithm will be a helpful guide to the work of the Board of Nursing.

The Board also discussed the current status of the Road to Recovery Program (R2R) sponsored through the Board of Nursing. This alternative program has been in existence for nurse licensee's that voluntarily self report an issue with substance abuse. An overview of current processes shows a very small number of licensees participating in the program, which does not utilize decreased office staff resources very efficiently. The majority of Nurse licensees that are monitored are done under Board discipline following a complaint. The recommendation to the Board was to suspend the program. The Board unanimously agreed to suspend the program beginning October 1, 2012. Those participants that are currently in the program will remain until their contract expires. The website will post information on resources.

**Nurse Workforce Data:** As part of the Robert Wood Johnson and Nurse of The Future Initiatives, NH Board of Nursing will have a link for nurses to access to provide data anonymously regarding education and work involvement. This link will be attached for access with the Nursing License Renewal application, and on our website under announcements. Watch for the announcement on the website. We strongly urge you to participate with this data collection because it helps to provide a better picture of what the nursing workforce in NH looks like. Announcement on the Home Page is forthcoming!!

**Website Upgrade:** With the help of the State IT department, the BON website will be redone to comply with State standards as well as to improve upon the navigation bar and provide better linkage to current information. We hope to have this project completed by early 2013.

Be well and practice safely for those under your care.

You can contact Board Staff on line by clicking on their email address below.

### **Board Staff**

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Executive Director

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Debbie Emerson  
Secretary II

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Laurel A. O'Connor, Esq  
Investigator/Prosecutor

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### **WELCOME to NEW BOARD and COMMITTEE MEMBERS!!**

The BON welcomes Tracey Collins as a member of the board. Tracey became official in May and comes with a wide range of experience that spans acute care, education and management. She replaces a previous board member who relocated out of state.

The Board said good-bye to Sharon Dyer, LPN at its November Board meeting. Sharon has been a Board member for 9 years. She will be missed. The Board will welcome Ann Waddell, LPN as Sharon's replacement at its December Board meeting.

The APRN Liaison Committee has just recently added a new member. Welcome to **Micheline Cignoli, APRN** who is an ANCC certified Pediatric nurse who works with a Dartmouth affiliated practice. Her expertise is valuable to this diverse committee.

The Practice and Education Committee has just experienced departure of many long term members. The Board thanks **Connie McAllister, Barbara Pascoe, Nancy Fredholm and Renee Maynes** for their tireless efforts at addressing clinical questions directed by the Board. We wish them well in their future endeavors! New participants for this committee were welcomed at the September 27<sup>th</sup> meeting. They are: **Nora Fortin (board member liaison), Rita Anger, RN, Bette Ann Bogdan, RN, Deborah Cantlin, RN, Nancy Holbrook, RN, Jacqueline McCourt, APRN, Paula Nelson, RN, Margaret Pedone, RN, Emily Roy, RN and Marie York, RN.** This group provides a diversity of experience that covers community, acute care, home care, quality assurance and education. The Board looks forward to utilizing their expertise with future clinical inquiries.

### **FROM THE BOARD VICE-CHAIR**

Dr. Karen Baranowski DNSc., RN

Substance use, abuse and dependence are challenging illnesses that mar all professions where individuals come into contact with narcotics and other new medications to address personal issues of pain and emotion. The profession of nursing is not immune to this issue, with 48 reported incidences annually reported to the NH Board of Nursing. The overriding mission of state boards of nursing is to protect the public from risk, and risk includes nurses working under the influence of alcohol and drugs.

Historically, there have been two avenues to deal with issues of alcohol and drug use, and diversion of narcotics. One model is an alternative program model which tries to support the RN with detailed oversight and stipulations while allowing them to continue to practice. The second model is a disciplinary program model which prioritizes the safety of the public over the individual circumstances of the nurse, and usually results in a board decision to suspend or revoke the privilege to practice.

Challenges to the budget at the state of New Hampshire level have also proved challenging to the Board of Nursing. Over the last biennium, the Board lost 2 clerical positions and the Assistant Director to the Board position. There are currently 2 FTE's with nursing licenses at the Board. Consequently, changes to programs offered by the Board have been under review to consolidate office operations while continuing to respond, in a timely manner, to the myriad of issues faced by licensees.

One such change is the Road to Recovery Program (R2R), a NH alternative

**HELPFUL HINTS:**

When calling the Board office, please be ready to provide your name, license number and remember to have a pen and paper ready to write down the information you may be seeking.

**BOARD COMMITTEES****P & E Committee**

Nora Fortin, RN  
(Board representative)

Rita Anger, RN

Bette Ann Bogdan, RN

Deborah Cantlin, RN

Nancy Holbrook, RN

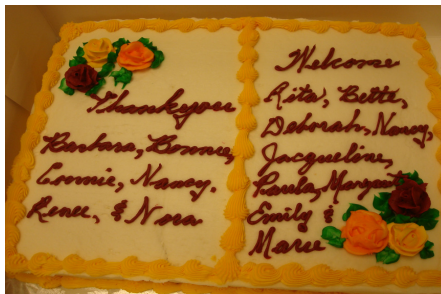
Jacqueline McCourt, APRN

Paula Nelson, RN

Margaret Pedone, RN

Emily Roy, RN

Marie York, RN



P & E

Welcome new Members and Thank You to leaving members

program model for nurses with alcohol and/or substance abuse issues. On September 20, 2012, the Board made the difficult decision to suspend the R2R Program for future abuse and diversion licensees. The Board has less than 5 licensees under R2R contract to the Board will be able to complete their contracts as stated. New licensees coming to the Board with substance use or abuse issues will be met with disciplinary action and adjudication in proven issues of dependency. Issues that drove the decision included inadequate resources to monitor nurses, a lack of clear boundaries between a regulatory/adjudicatory body and treatment program and the ongoing issue of public safety.

Research now verifies that chemical dependency is a chronic rather than an acute illness, and long term case management increases the likelihood of successful recovery. It is also recognized that to effectively case manage nurses in recovery, one must have expertise in addiction and recovery methodology and be able to sustain active surveillance. The Board no longer has the capacity to manage a treatment program and deal with the significant recidivism that haunts those that relapse. Research also shows that fewer than 10% of those with substance use disorders will seek or receive treatment. (Tighe and Saxe, 2006). Consequently, the Board has taken the appropriate action at this time to protect the public and suspend the treatment program as Road to Recovery.

***On-line Licensing-Renewal Reminder***

*Before you can renew your license on-line you must receive your renewal notice from the Board of Nursing.*

*Once you receive your renewal notice you can renew your license on the Board website at [www.nh.gov/nursing](http://www.nh.gov/nursing) under the Online Licensing tab in the "Quick Links" box on the right hand side of the Home Page.*

*Before you are able to renew your license you must register on the licensing site. You must obtain a registration code from the Board office prior to being able to register. Once you obtain your registration code you can then register. Registration includes setting up a User ID and Password. This user ID and password must be used each time you renew your license on-line. Be sure to write down your User ID and Password for future reference.*

***To obtain your registration code:***

*Email the Board office at [boardquestions@nursing.state.nh.us](mailto:boardquestions@nursing.state.nh.us). Provide your full name, license number and date of birth.*

***Clinical Practice Inquiry***

*All practice inquiry questions must be submitted on the **Clinical Practice Inquiry Form** found on the Board website [www.nh.gov/nursing](http://www.nh.gov/nursing) under the "Forms" tab. All forms submitted must include the clinical significance of the question asked. Prior to sending inquiries to the BON, please review the clinical practice advisories and frequently asked questions to ensure that your question has not been previously answered by the Board. Forms may be mailed, faxed or emailed to the Board office.*

***Mail:***

NH Board of Nursing  
21 South Fruit Street, Suite 16  
Concord, NH 03301

**fax:** 603-271-6605

**email:** [boardquestions@nursing.state.nh.us](mailto:boardquestions@nursing.state.nh.us)

**Continued Education – Audit Reminder** To assure timely renewal of your license, if selected for audit please provide your continuing education/contact hours documentation on the **Continuing Education/Contact Hour Audit Form**.

*Documentation received other than the Audit Form will be returned to the licensee which may cause a delay in license renewal.*

*If your renewal application and audit forms are not received on or before*

**Liaison Committee**

Kathleen (Kitty) Kidder, APRN,  
(Board representative)

Lisa Sullivan, APRN, CRNA  
Chair

Joyce Blood, APRN

Dorothy Mullaney, APRN

Margaret Franckhauser, RN

Sean Lyons, APRN

Mary Sanford, APRN

Micheline Cignoli, APRN

**State Holidays Observed****2012**

Thanksgiving Day	Nov 22, 2012
Day after Thanksgiving	Nov 23, 2013
Christmas Day	Dec 25, 2012

**2013**

New Year's Day	Jan 1, 2013
Martin Luther King Day/	
Civil Rights Day	Jan 21, 2013
President's Day	Feb 18, 2013
Memorial Day	May 27, 2013
Independence Day	July 4, 2013
Labor Day	Sept 2, 2013
Veterans' Day	Nov 11, 2013
Thanksgiving Day	Nov 28, 2013
Day after Thanksgiving	Nov 29, 2013
Christmas Day	Dec 25, 2013

*midnight of your birth date, you will be practicing without a valid license and will have to reinstate your license, and pay an administrative fee if practicing during license lapse.*

***Continued Education Requirements:***

***APRN's:*** 30 contact hours for RN licensure, 30 additional hours specific to APRN specialty, 5 of which shall be pharmacology specific, in 2 years prior to date of renewal. ***RN/LPN's,*** 30 contact hours.

***RN/LPN's:*** 30 contact hours within 2 years prior to date of your renewal application.

***LNA's:*** 12 contact hours for each year (for a total of 24 hours), within 2 years prior to date of your renewal application. (For LNA's who are certified as Medication Nursing Assistant (MNA's), 4 out of the 12 contact hours per year must be related to medication administration.)

*Guidelines for Continuing Competence can be found on the Board website [www.nh.gov/nursing](http://www.nh.gov/nursing) under the Licensure tab on the Home Page.*

**Report of NCSBN Delegate Annual Conference  
Dallas, Texas**

**August 8-10, 2012**

**Submitted by: Katherine Kidder, APRN, Board Member**

I was privileged to attend the NCSBN annual conference recently. I was also asked to participate as a member of the Resolution Committee. The whole experience was an incredible learning experience toward understanding the legislative process even more completely. The three days were an amazing combination of learning, playing, meeting new peers in a lovely surrounding with exceptional detail to every need of the participants.

During these few days there were numerous allowances for networking including a trip to South Fork Ranch. For all the *Dallas* fans attending, it was a great opportunity to imagine meeting *JR Ewing* or someone else from the show in their "home". For those who have never followed the show, it was an opportunity to get away from the city and see some of the wide open flat spaces surrounding Dallas. Either way, it was an opportunity to meet a few people and for returning delegates, an opportunity to renew old friendships.

Another networking opportunity came as the gathering of Region IV including ME, NH, VT, MA, CT, RI, NY, NJ, PA, DE, MD. It was lead by Ann O'Sullivan, Region Director. It was also attended by Myra Broadway, President of NCSBN, as she is from Maine. Some of the discussion was centered on the Consensus Model. I expressed that we in NH were having some difficulty with the foci and acute or primary care. A discussion followed about what was difficult and what we learned was that we need not to consider *acute care* or *primary care* as setting. In other words acute care or primary care describes the need of the patient, not where the care is taking place. (This made sense to me when I thought about a patient I had seen in the office recently. She is an elderly patient who I have seen for years for hypertension and dyslipidemia.

She came in because she was severely nauseated and had been since her surgery which had resulted in an ileostomy. When I walked into the room, I knew she needed more care than is within my scope of practice and worked to get her admitted to the hospital. It turned out she was in renal failure. She needed the care of an acute care clinician, not a primary care clinician.) According to Ann, the paragraph under the graphic in the Consensus Model does a better job of describing the concept than the picture. I agreed to disagree on that point, but the explanation of not setting certainly helps me to understand!

Learning opportunities were numerous especially with serving on the Resolutions Committee. First of all, *Roberts' Rules* are adhered to, strictly. Therefore, the proposed Model Act and Model Rules were presented



### **Complaint Reporting**

**Pursuant to RSA 326-B:37 V:** Every individual, agency, facility, institution, or organization that employs licensed nursing personnel within the state shall report to the board within 30 days any alleged violations of the Nurse Practice Act (RSA 316-B:37, RSA 326-B:41 and Nur 402.04(b).

**Reportable violation are cited in RSA 326-B:37 II, Nur 402.04 (b) and Nur 402.04 (c).**

**Any alleged violation of the Nurse Practice Act reportable to Bureau of Adult and Elderly Services (BEAS) should also be reported to the Board of Nursing.**

**The complaint form and guidelines can be found on Board of Nursing website [www.nh.gov/nursing](http://www.nh.gov/nursing) under Enforcement.**

### **Out of State Applicants and Criminal Background Checks/Fingerprints**

Applicants from outside of NH will be sent fingerprint cards and authorization forms. Those applicants are asked to either use law enforcement sites in their respective states or come to NH and use a NH law enforcement site. Please send all fingerprint cards, authorization forms and fees to the Board of Nursing. The board will then send them to the NH State Police for processing.

**Please plan early for this process. We have advised that the results could take as long as 2 months in some cases.**

You are encouraged to complete live scan fingerprinting. Some live scan sites are located on the Board's website at [http://www.nh.gov/nursing/documents/livescan\\_list.doc](http://www.nh.gov/nursing/documents/livescan_list.doc)

If you do not find a convenient live scan site please call the NH State Police Criminal Records.

by the committee that had reviewed them on the first day. There were opportunities for those attending to ask questions about the changes being recommended. There were a few "problems" identified and members then had a chance to submit amendments. The Parliamentarian was available and all amendments had to come before the Resolutions Committee. The sponsor of an amendment had to meet with the committee to work out wording and process for introducing the amendments. All amendments and resolutions had to be introduced by a delegate. During the Delegate Assembly, when we were voting, the process was orderly and each amendment was discussed and voted prior to the Act and the Rules in their entirety. I did not bring forward my concerns of mandating wearing name badges in the Act because I lacked the confidence to do that. However, since I am very much an experiential learner, participating in a process is an incredible teacher!

I am grateful for the opportunity to have attended the Delegate Assembly. I learned much about the legislative process and I hope that I have the option to go again as I feel I could/would be much more effective with this year's experience.

### **Working with an inactive license is a Class A Misdemeanor.**

Beginning October 1, 2011 all licensees who have worked with an inactive license will be posted in the Board's quarterly Newsletter. Practicing without a license, including but not limited to the situation where a license has lapsed, is unlawful under New Hampshire law and constitutes a class A misdemeanor. RSA 326-B:41, II; RSA 326-B:41-a. Pursuant to **RSA 326-B:22, II**, "Any person licensed who intends to continue practicing as a nurse or nursing assistant shall: (a) By midnight on his or her date of birth in the renewal year submit a completed application and fees as established by the board." "Failure to renew the license shall result in forfeiture of the ability to practice nursing or nursing activities in the state of New Hampshire." RSA 326-B:22, III.

When a licensee telephones the Board or presents themselves at the Board office and discloses they have worked after the expiration date of their nursing/nursing assistant license they will be required to sign an Agreement and pay all reinstatement fees and fines before they are eligible to return to work. The Agreement states that the document must be shared with the employer.

Should the licensee practice nursing a second time on an inactive license, they will be informed that their action will be reviewed by the Board at its next meeting for Board action. The license will be reinstated pending Board action.

**Pursuant to RSA 326-B:37 V:** Every individual, agency, facility, institution, or organization that employs licensed nursing personnel within the state shall report to the board within 30 days any alleged violations of the Nurse Practice Act (RSA 316-B:37, RSA 326-B:41 and Nur 402.04(b).

**Reportable violation are cited in RSA 326-B:37 II, Nur 402.04 (b) and Nur 402.04 (c).**

Any alleged violation of the Nurse Practice Act reportable to Bureau of Adult and Elderly Services (BEAS) should also be reported to the Board of Nursing.

The complaint form and guidelines can be found on Board of Nursing website [www.nh.gov/nursing](http://www.nh.gov/nursing) under Enforcement.

**New Hampshire  
LNA's of the Year  
2012**

**Congratulations to the Association'  
winners!**

Claribel Aloyo – NH Association of  
Residential Care Homes  
Talbot Blanchard – NH Hospital Association  
Stacy Paquette – Home Care Association of  
NH  
Davis Shultz –NH Association of Counties  
Rachel Winters – NH Healthcare Association



Rachel Winters, pictured with John Porier,  
NHHCA President

**New Hampshire  
Nursing Assistant (NA) Registry  
FAQ's**

The Omnibus Budget Reconciliation Act of 1987 contained provisions designed to assure delivery of quality care to long-term care facility residents. Federal regulations require each state to establish and maintain a nurse aide registry.

**Question: What is the Nursing Assistant Registry?**

**Answer:** *The Nursing Assistant (NA) Registry is a list of individuals who have completed training and competency evaluation who the state finds to be competent to function as a nursing assistant. Successful completion of a Board approved nursing assistant program and competency test (state testing) identifies an individual as being competent to function as a nursing assistant.*

**Question: When I verify my new license online, what does "Not Licensed, Registry Only" mean?**

**Answer:** *"Not Licensed, Registry Only" means that you have been placed on the NH Nursing Assistant (NA) Registry. Licensure is not required to be placed on the NA Registry.*

**LNA Corner**

by Lori Tetreault, RN-BSN Program Specialist IV

I hope everyone enjoyed the beautiful summer and will have the opportunity to enjoy the autumn season. The Board has been busy with many activities since the last newsletter.

Again our Spring LNA Day of Discussion was fully attended. All healthcare settings were represented including home care, acute care, office settings as well as long term care. Attendees provided us with valuable feedback that will be considered for future discussions. The MNA "Day of Discussion" will be held on November 9, 2012. The Registration form can be found on the Board of Nursing website [www.nh.gov/nursing](http://www.nh.gov/nursing) under "Announcements and Notices."

Days of Discussion are dedicated to address licensed nursing assistants concerns regarding practice issues. Practice questions submitted to the Board for review and response are posted in our newsletter and on the Board website as Clinical Practice Inquiries. We encourage our licensed nursing assistants to read and discuss issues brought to this section.

June 4, 2012 Licensed Nursing Assistants from across the state gathered on the State House lawn to be recognized and honored by the Governor for their dedication and contribution to New Hampshire citizens. Participating in this event, presenting certificates of recognition reminds me of how important the Nursing Assistants role is within our healthcare system here in NH. Again our Spring LNA Day of Discussion was fully attended. All healthcare settings were represented including home care, acute care, office settings as well as long term care. Attendees provided us with valuable feedback that will be considered for future discussions.

Effective July1, 2012 applicants seeking licensure based on comparable education must meet all curriculum requirements of Nur 704.09 to be considered for licensure. Please review Nur 704.09 prior to suggesting equivalency and submitting an application for Challenge approval.

The LNA/MNA Coordinators meeting will be held on October 26, 2012. This event is dedicated to education program review, Board updates and program networking. All Program Coordinators are encouraged to attend. The afternoon session will be open to nursing assistant educators and the discussion will be focused on curriculum review and compliance.

It is the responsibility of every licensee including nursing assistants to know the rules governing their license and practice. In the months ahead Nursing Administrative rules will be reviewed including all rules that apply to nursing assistant practice. Stay tuned for opportunities for comment.

Enjoy the fall and the upcoming holiday season.

*Nursing Assistant Licensure will be stated separately with a license number and status.*

**Question: Is licensure required to be placed on the Nursing Assistant Registry?**

**Answer:** *No. Registry findings do not require licensure of the individual placed on the registry but could involve discipline imposed by the Board of Nursing on a nursing assistant's license.*

**Question: What information does the Registry hold?**

**Answer:** *The registry includes the individual's full name, identifying information, the date the individual became eligible for placement on the registry and any finding of abuse, neglect or misappropriation of property by the individual. Registry findings may or may not include discipline placed on a license.*

**Question: Where can I access the NH Nursing Assistant Registry?**

**Answer:** *The Nursing Assistant Registry can be accessed on the Board of Nursing website: [www.nh.gov/nursing](http://www.nh.gov/nursing). The registry verification link can be found on the homepage. The registry can also be accessed under the License Verification link located in the "Quick Links" box on the right hand side of the homepage.*

**LNA/MNA Reminders:**

- NH has a mandatory licensing law. No person may practice as a nursing assistant without a license. The NH Board of Nursing **defines "practicing"** as including **attendance at orientation or completing other types of non-director care activities.**
- Documentation of Continued Education is required for all endorsement applications pursuant Nur 304.04(b)(4).
- Education considered as comparable for Challenge Program approval must meet the requirements of Nur 704.09 pursuant Nur 704.11.
- All questions must be answered on renewal or reinstatement applications including Nurse Supervisor and Employer. Incomplete applications will be returned which may delay renewal or reinstatement of licensure and the inability to work as a nursing assistant.. Licensees working without an active license may be subject to a \$50 fine for every calendar month or any part thereof, during which one practices.
- Licensed nursing assistants who are working in non-licensed positions (PCA-Personal Care Assistant) can not use work hours as active in practice requirements for renewal.

**LNA REINSTATEMENT  
Frequently Asked Questions (FAQ's)**

**Question: What is reinstatement of a license?**

**Answer:** Changing an inactive LNA license into an active LNA license.

**Question: Can I complete the process online?**

**Answer:** No, a reinstatement cannot be completed online. You may call the N.H. Board of Nursing (603) 271-6282 for guidance as to how to reinstate your license or you may come into the Board office and we can assist you.

**Question: Can I work in N.H. on an expired license until I have time to complete the process?**

**Answer:** NO, you may NOT work in N.H. as an LNA on an expired license. That means you cannot work using your LNA knowledge, judgment and skills and you cannot get paid as a LNA. By working as an LNA and or getting paid as an LNA you will be subjected to administrative fines.

**Question: What requirements do I need to meet in order to reinstate my LNA license?**

**Answer:** You must have either: Completed 200 hours working as an LNA under the supervision of an licenses nurse (please be prepared to list his/her FULL name) and completed 24 continuing education hours (12 in each year). Please remember you may be asked to provide proof of your CE. hours.

**OR**

Have successfully completed the written and clinical competency testing within 2 years immediately prior to the date of your reinstatement application.



### **LNA/MNA\* Continuing Education Programs offered by the Board.**

Visit the website [www.nh.gov/nursing](http://www.nh.gov/nursing)

#### **Each program offers 1 contact hour**

Pain: The Basics\*  
 LNA Scope of Practice  
 MNA Scope of Practice\*  
 Delegation  
 Teamwork  
 Professional Boundaries  
 Residents Rights  
 Topical Drugs  
 Medication Administration Safety\*  
 Oral Health Care for the Elderly  
 Alzheimer's Dementia in the Elderly  
 Oxygen Therapy  
 Proper Bowel Elimination  
 Understanding the Dying Patient  
 Nutritional Needs  
 Medication Considerations for Elderly\* **New**  
 Back Safety **New**  
 Elder Abuse **New**  
 Social Networking

#### **ANNOUNCEMENTS:**

**Beginning** April, 2012 the NH BON newsletter will be published and available on the website twice a year in April and October.

**The LPN IV Program**, listed on the website will be offering instruction for RN's. Classes should be available beginning Fall, 2012. See Board website for individual program information.

To assist licensees with decisions regarding LNA "Scope of Practice", a decision tree has been developed. This tool can be used by LNA's, nursing assistant educators and nurse supervisors delegating to nursing assistants. This tool can be found on the Board website under the "Practice" tab on the homepage.

Enjoy the newness of spring, take a few minutes of your day to "stop and smell the roses". Thank you for the work you do each day and the dedication you show to those you care for.

### **Governor Lynch Declares June 7, 2012 "Nursing Assistant's Day" in New Hampshire**

On June 7, 2012 at the 13<sup>th</sup> Annual LNA Day Celebration Event held on the State House lawn, Governor Lynch proclaimed Nursing Assistant's Day in New Hampshire in celebration to honor licensed nursing assistants who serve the citizens of NH across the spectrum of healthcare.

Licensed nursing assistants from around the State were nominated as LNA of the Year.

Nominees were presented certificates of appreciation by Lori Tetreault, RN-BSN, LNA Program Specialist from the NH Board of Nursing.

The Board of Nursing would like to congratulate all of the 2012 nominees:

Claribel Aloyo  
 Brienne Austin  
 Diane Benson  
 Linford Bent  
 Elaine Bienvenue  
 Michélie Bissonette  
 Talbot Blanchard  
 Susie Bloomberg  
 Stephanie Bowden  
 Krista Brady  
 Leeann Bronson  
 Heather Brooks  
 Laura Campbell  
 Toni Campbell  
 Jane Casey  
 Jayne Cayes  
 Thomas Chouinard  
 Donna Cooper  
 Justina Davis  
 Margaret Day  
 Holly Delay  
 Ruella Delim  
 Theresa DeRemer  
 Bob Desruisseaux  
 Paula Don  
 Tawni Donovan  
 Patricia Drew  
 Joan Drew  
 Myrlande Driscoll  
 Cheryl Eastman  
 Jeff Elliott  
 Robin Fountain  
 David Hayward  
 Kelly Irving  
 Dylan James  
 Patricia Jennison  
 Ella Kreku

Diane LaFlamme  
 Jennifer LaBlanc  
 Claudia Leonard  
 Brenda Libby  
 Mark Loven  
 Francine Maclean  
 Shelby Mallet  
 Brenda Marquis  
 Rossana Martel  
 Joyce McCullough  
 Amy McIntyre  
 Cindy McKinnon  
 Greidy Pamela Medrano  
 Vanesa Meuse  
 Helen Moore  
 Linda Noll  
 Heather Nugent  
 Marilyn Odendahl  
 Stacy Paquette  
 Hiliary Pentasuglia  
 Betty Peterson  
 Michelle Proto  
 Christy Reed  
 Shaina Rowell  
 Lisa Roy  
 Daniel Ruggieri  
 David Schulze  
 Diane Serer  
 Bonnie Stewart  
 Angela Stone  
 Susan Therriault  
 Pauline Timpson  
 Pattama Tonyai  
 Kimberly Verrill  
 Renee Willis  
 Rachael Winters

### FINGERPRINTING/CRIMINAL BACKGROUND CHECK REMINDERS

1. When completing the fingerprint/criminal background check within New Hampshire, fingerprint cards are NOT necessary. “Live Scan” fingerprinting does not require cards unless the fingerprinting is completed out of state, in which case the cards MUST be obtained from the Board of Nursing office.
2. The Board of Nursing application fee DOES NOT include the fingerprinting/criminal background check fee. Depending upon which way the fingerprinting/criminal background check is complete and the location will determine the fee. Please refer to the Board of Nursing website [www.nh.gov/nursing](http://www.nh.gov/nursing) under the “FBI Fingerprinting Requirements” in the section marked “Quick Links” for fee schedule.
3. All criminal background checks MUST be notarized.
4. “Live Scan” fingerprinting is encouraged of ALL of our applicants, as the rejection rate is much lower.
5. Please remember that most police departments charge a processing fee which varies depending on the location.

### Continuing Education Audit Frequently Asked Question (FAQ)

#### Question:

How do I submit my Continuing Education for Audit?

#### Answer:

To assure timely renewal of your license, please provide the information requested on the attached Continuing Education/Contact Hours Audit form and return the form, with your renewal, to the Board immediately.

**Continuing Education/Contact Hour documentation not submitted on the Audit Form will be returned to you. This may delay renewal of your license.**

Your license will be updated upon receipt of your renewal application and approval of your contact hours

If your renewal application and audit forms are not received, in the Board office, before midnight of your birth date, you will be practicing without a valid license and will have to reinstate your license, and pay an administrative fee if practicing during licensure lapse.

Audit forms can be downloaded on the Board website [www.nh.gov/nursing](http://www.nh.gov/nursing) under the “Forms, Applications & Publications” navigation tab on the homepage.

**Audits may be faxed or mailed to the Board office:**

**NH Board of Nursing  
21 South Fruit Street, Suite 16  
Concord, NH 03301**

**Fax: (603) 271-6605**

### IMPORTANT REMINDERS FROM THE BOARD OF NURSING [www.state.nh.us/nursing](http://www.state.nh.us/nursing)

#### PAPER LICENSES ARE NOT PROVIDED

Verify and print license information using the Online Verification Quick Link on the right side of the Home Page.

#### RENEWAL REMINDER POSTCARDS ARE MAILED 6 WEEKS PRIOR TO MONTH OF RENEWAL

#### RENEWALS MAY BE DONE ONLINE OR RETURN POSTCARD AS DIRECTED TO OBTAIN A RENEWAL APPLICATION

Fees are to be sent with renewal applications not with the postcards.

#### FOR ONLINE RENEWAL – REGISTER AS A FIRST TIME USER BEFORE ATTEMPTING TO RENEW A LICENSE

Follow the instructions on the Online Licensing Quick link on the right side of the Home Page.

Make sure you remember your user name and password for future use+.

**MAKE SURE YOU PRINT THE RECEIPT PAGE AFTER PROCESSING YOUR PAYMENT.**  
The receipt can not be reproduced by the Board office. It is proof that payment was accepted, should there be a problem.

**WHEN APPLYING FOR ORIGINAL LICENSURE ON LINE**

Make sure you write down and save your user name and password. This information will be necessary for renewing your license on line when it is renewal is due. This information is not automatically saved in the system.

**CRIMINAL BACKGROUND CHECKS AND FINGERPRINTING IS REQUIRED FOR ALL INITIAL LICENCES AND ENDORSEMENTS**

Follow the directions under the Endorsement Link. The processing time may take 4-6 weeks so plan to start the process early. Licensing will not be processed until background checks and fingerprinting results are obtained.

**THE BOARD MUST BE NOTIFIED OF ALL NAME AND ADDRESS CHANGES**

A \$10 fee may be incurred if address changes are not made within 10 days.  
The Board must be notified in writing.

**ACTIVE IN PRACTICE AND CONTINUING EDUCATION REQUIREMENTS INFORMATION CAN BE FOUND ON THE HOME PAGE ON THE WEBSITE**

Click the Licensure Link on the left side of the Home Page.

**Clinical Practice Advisories: January 2012 – August**

Board Advisory Date:	
<p><b>January 19, 2012</b></p> <p>LMA's placed in newborns by RNs.</p> <p>LNA Scope of Practice with use of GS Vibracare persussor</p> <p>LNA Scope of Practice: Patient Teaching</p> <p>Therabath Paraffin Wax treatments within RN/LPN or LNA scope of practice</p>	<p>Question:</p> <p>Is it within the scope of RN practice to place LMA's in newborns</p> <p>Answer: Board opined that placement of LMA's in newborns is not within RN scope of practice</p> <p>Question:</p> <p>Is it within the LNA scope of practice to use GS Vibracare Persussor?</p> <p>Answer: Board opined that it is within the scope of LNA practice to use GS Vibracare Persussor.</p> <p>Question:</p> <p>Is it within the scope of LNA practice to teach patients?</p> <p>Answer: Board opined that it is not within the scope of LNA practice to teach patients.</p> <p>Question:</p> <p>Is it within the scope of practice for RN's, LPN's and/ LNA's to implement Therabath treatments with Paraffin Wax?</p>

<p>LPN Scope of Practice: TB Testing</p>	<p>Answer: Board opined that Therabath Paraffin Wax treatments may be implemented by RN's only.</p> <p>Question:</p> <p>Is it within the LPN scope of practice to perform TB (Mantoux) testing?</p> <p>Answer: Board opined that it is within LPN scope of practice with training and competency requirements met.</p>
<p><b><u>March 15, 2012</u></b></p> <p>Sweat test procedures by LNA</p> <p>Can LNA/MNA sign for medications?</p> <p>Can RN perform amniotomy?</p> <p>Can RN insert LMA into newborn for resuscitation?</p> <p>Can Nitrous Oxide be administered by RN?</p> <p>RN's working in Endoscopy unit</p> <p>Use of lasers</p> <p>Induction of labor</p>	<p><b>Question:</b> Is it within LNA scope of practice to assist in sweat test procedures?</p> <p><b>Answer:</b> Board consensus that it is within LNA scope of practice provided facility policy to support procedure and documented training and competency.</p> <p><b>Question:</b> Is it within LNA/MNA scope of practice to accept and sign for medications delivered to the facility by the Pharmacy?</p> <p><b>Answer:</b> Board consensus that it is within MNA scope of practice to accept and sign for medications delivered to the facility by the pharmacy with delegation and supervision of a licensed nurse. It is not within LNA scope of practice.</p> <p><b>Question:</b> Is it within RN scope of practice to perform amniotomy specific to emergent situations where primary doctor or midwife is not present?</p> <p><b>Answer:</b> Board consensus is that this procedure is not within the RN scope of practice.</p> <p><b>Question:</b> Is it within RN scope of practice to insert LMA into newborn for purposes of resuscitation?</p> <p><b>Answer:</b> Board consensus is that it is not within RN scope of practice to place advanced airway (laryngeal mask airway or endotracheal tube)</p> <p><b>Question:</b> Can Nitrous Oxide be administered by mask by RN in the Emergency Room?</p> <p><b>Answer:</b> Board Consensus is that the RN can only provide mask to patient for self-administration. It is not within RN scope of practice to administer medication by applying mask to patient.</p> <p><b>Question:</b> Can an RN working in the Endoscopy unit perform the following actions under RN scope of practice: a) hold endoscope; b) manipulate endoscope controls; c) insufflate; d) snare wire; e) position or pull gastrostomy tube?</p> <p><b>Answer:</b> Board consensus to follow SGNA recommendations for practice in this specialty. Manipulation of endoscopic controls and insufflation are not within recommendations of SGNA, but RN may hold endoscope, snare wire and position or pull gastrostomy tube provided there is training and competency completed.</p> <p><b>Question:</b> Can an RN use lasers for procedures resulting in ablation of the tissue?</p> <p><b>Answer:</b> Board reaffirmed December 21, 2006 decision that it is within the nurse scope of practice to administer non-ablative laser treatments (non-ablative does not cause tissue destruction) provided competencies are met. Tattoo removal involves ablating the skin and thus is not within the scope.</p> <p><b>Question:</b> Can an RN insert cervidil vaginal for cervical ripening or induction of labor?</p> <p><b>Answer:</b> Board affirms that it is within the scope of RN practice with facility policies in place and competencies completed.</p>

Telehealth nursing	<p><b>Question:</b> What are the licensure requirements for Utilization Review and Case Management RN's to practice across state lines?</p> <p><b>Answer:</b> Board opined that this category of nurses falls under telehealth nursing and suggests a reference to the FAQ on the website for the specific details on licensure.</p>
<b><u>May 17, 2012</u></b>	
Can an LPN insert manometry catheter?	<p><b>Question:</b> Can a licensed practical nurse, with training, insert a manometry catheter into a patient to assist in performing an esophageal manometry study?</p> <p><b>Answer:</b> Board affirmed that NG tube placement is within LPN scope of practice and insertion of esophageal manometer follows same procedure. This task is within scope in stable population with institution policy to support practice and documented training and competency.</p>
Bone marrow biopsy by RN	<p><b>Question:</b> Is a bone marrow biopsy procedure within an RN scope of practice with appropriate education and competency process?</p> <p><b>Answer:</b> Board affirmed that bone marrow biopsy is NOT within RN scope of practice. Bone marrow biopsy is medical procedure and falls under auspices of Board of Medicine.</p>
Can LNA lavage nasal passages with saline?	<p><b>Question:</b> Can LNA, with appropriate oversight and competency, lavage nasal passages with saline.</p> <p><b>Answer:</b> Board affirmed that in stable population, following appropriate rules of delegation, with appropriate oversight and with institution policy to support practice and documented training and competency, it is within LNA scope of practice to lavage nasal passages with saline.</p>
RN scope of practice to digitally reinsert prolapsed rectum	<p><b>Question:</b> Is it within RN scope of practice to digitally reinsert prolapsed rectum?</p> <p><b>Answer:</b> Board affirmed that digital reinsertion of prolapsed rectum is within scope of practice of RN in patient with previously diagnosed rectal prolapse, appropriate physician order, institution policy to support practice, and documented training and competency to support practice.</p>
<b><u>June 21, 2012</u></b>	
RN/LPN scope of practice to change Coude catheter	<p><b>Question:</b> Is it within RN or LPN scope of practice to change coude catheter with training?</p> <p><b>Answer:</b> Board affirmed that it is within RN/LPN scope of practice provided competencies are met.</p>
RN/LPN scope of practice to work as histologic technician in Mohs lab	<p><b>Question:</b> Is it within RN/LPN scope of practice to work as histologic technician in Mohs lab?</p> <p><b>Answer:</b> Board opined that this activity is not under RN/LPN scope of practice. If RN/LPN chose to function as Histologic Technician, active-in-practice hours would not count towards renewal. It is not within RN/LPN scope of practice to obtain specimen.</p>
RN/LPN scope of practice to administer vaccinations based on indication of protocol.	<p><b>Question:</b> Is it acceptable for RN/LPN to administer vaccinations based on indication of protocol ordered by provider in patient's electronic medical record? This protocol would replace separate orders for each vaccine due at given point in schedule and would be spelled out in established guideline.</p> <p><b>Answer:</b> Board opined that administering vaccinations are under RN/LPN scope of practice. Protocol process is not under purview of Board – it is guided by regulations of clinical practice setting.</p>
RN scope of practice related to	<p><b>Question:</b> What RN scope of practice is related to using C-arm fluoroscopy?</p>



using C-arm fluroscopy	<b>Answer:</b> Board affirmed previous decision that any function required to operate C-arm is not within RN scope of practice. Entering documentation is allowed.
<b><u>July 19, 2012</u></b>	
LPN scope of practice re: ASC Endoscopy patients	<b>Question:</b> Is it within LPN scope of practice to care for and document patients who have been given propofol for endoscopy procedure? Can LPN admit and recover these patients?  <b>Answer:</b> Board opined that LPN can assist in care of post-operative patient in recovery, but is prohibited from doing comprehensive assessments which are done at admission and at discharge.
Protocol/Standing Orders	<b>Question:</b> Is it within LPN scope of practice to follow protocol orders in regard to bowel regimens, routine pain meds, treatments for minor skin tears/burns, etc.?  <b>Answer:</b> Board opined that following protocol orders by provider in regard to bowel regimens, routine pain meds, or treatment for minor skin tears/burns is within LPN scope of practice. Protocol process is not under purview of Board – it is guided by regulations of clinical practice setting.
<b><u>August 16, 2012</u></b>	<b>Question:</b> Clarification of previous opinion dated June 21, 2012, regarding C-Arm operation.  <b>Answer:</b> Initial placement and setting of C-Arm must be done by radiology technician. C-Arm repositioning and shielding can be done by competently trained RN under supervision of surgeon. C-Arm documentation can be done by RN.

**NH BOARD OF NURSING**

**EDUCATION PROGRAMS: BOARD ACTIONS**

<b><i>Program</i></b>	<b><i>Program Coordinator/Chair</i></b>	<b><i>Board Action</i></b>
<b><u>April 19, 2012</u></b>		
Nashua High School-South LNA Program	Christine Lefave-Remington	Continued Approval
Manchester School of Technology LNA Program	Linda Rea Camarota	Continued Approval
Crotched Mountain Rehab Center MNA Program	Sandra Knapp	Request to Discontinue-Approved
Regional Career Technical Center-Dover High School LNA Program	Margaret LaPointe	Continued Approval
<b><u>May 17, 2012</u></b>		
St Joseph School of Nursing LPN Program	Sherrie Palmieri	Continued Approval
Coos County Nursing Hospital LNA Program	Shelly Brown	Continued Approval
Lakes Region Community College LNA Program	Cathleen Weigel	Continued Approval
<b><u>July 19, 2012</u></b>		
Cheshire Career Center-Keene High School LNA Program	Catherine Kissell	Continued Approval
<b><u>September 20, 2012</u></b>		
St Joseph School of Nursing LNA Program	Diane Droutman	Continued Approval

**Returned Checks**

The following license continues to be invalid due to insufficient funds. The licensee was notified of the returned check.

**Licensed Nursing Assistant**  
Jessica Gadbois 025486-24

**DISCIPLINARY ACTIONS****March 2012 through September 2012**

At its November 15, 2007 meeting, Board members voted to publish names of individuals involved in disciplinary actions. At its March 20, 2003 meeting, Board members voted reprimands will no longer be posted in the Newsletter. Any questions please call Susan Goodness, Administrative Supervisor, at the Board office, (603) 271-3823.

<b>NAME</b>	<b>LICENSE #</b>	<b>BOARD ACTION</b>	<b>DATE</b>	<b>ACTION</b>
Judd, Christine	042450-21	Stipulation 3.D. modified	3/15/2012	
Taylor, Kimberly	013654-22	Modification to Section 4 of the 4/20/09 Bd corresp.	3/15/2012	
Bourget, Scott	022772-24	Upon successful completion of Comp. testing - License will be reinstated.	3/15/2012	
Davenport, Deborah	020257-24	Voluntary Surrender	3/15/2012	
Dionne, Julie	017605-24	Suspended 2 yrs	3/15/2012	Violating the Nurse Practice Act by failing to comply with the terms of her Road to Recovery Contract.
Kownack, Linda	000123-24	Voluntary Surrender	3/15/2012	
Ciampa, Richard	047256-21	Probation, restrictions & conditions removed	4/19/2012	
McCollough, Danielle	032859-21	Removed probation	4/19/2012	
Diresta, Anita	011055-22	Revocation	5/17/2012	Violating the Nurse Practice Act by failing to comply with a Board order.
Kabel, Kurt	046004-21	Suspend effective March 2, 2012	5/17/2012	Diversion; tested positive for Cocaine; Used a drug in a manner that could have impaired his ability to safely practice. Failed to maintain professional boundaries
Kabel, Kurt	046004-21	Probation AFTER MARCH 2, 2013	5/17/2012	
Matson, Christine	056055-21	Probation & Reprimand	5/17/2012	Falsifying patient documentation and care data.
DeCristoforo, Kim	059031-21	Reinstated with Probation w/restrictions and conditions	5/22/2012	
Bodley, Corin	057196-21	Preliminary Agreement for Practice Restrictions (indef)	6/16/2012	Must successfully complete all conditions imposed in the California Stipulated Settlement and Disciplinary Agreement.
Freeman, Joseph	058415-21	Probation w/conditions & stipulations 2 YRS	6/16/2012	Gave a patient oral medication via a PIC line.

Haile, Diana	052861-23 (21)	Revoked w/ \$2400 fine	6/16/2012	For failing to accurately and without omission complete medical records for her patients at Great Bay Mental Health, improperly managing patient records, engaging in unethical conduct by demonstrating a willful or careless disregard for the health or safety of patients; failing to provide reliable contact information to her clients, by writing prescriptions on Great Bay Mental Health prescription pads after her termination, engaging in unprofessional conduct as demonstrated by her inability to practice safely as a result of any mental or physical condition, failing to maintain professional boundaries, and by demonstrating a pattern of behavior incompatible with the standards of practice.
Moore, Kandice	014350-22	Voluntary Surrender	6/16/2012	
Kenney, Geraldine	021011-24	Voluntary Surrender	6/16/2012	
Davis, Melanie	038425-23	Reinstate APRN prescriptive authority	6/16/2012	
Miller, William	064655-21	Immediate Suspension	7/11/2012	
Morgan, Pauline	038076-21	Voluntary Surrender	7/19/2012	
Wilkins-Knight, Brenda	029072-21	Denied removal of probation	7/19/2012	
Porter (Blanchette), Crystal	025658-24	Modification to Condition E of the 2/1/10 Consent Agreement	7/19/2012	
Jacklin, Constance	062544-21	Suspended 6 mo	8/16/2012	Diverted Tramadol for her own use.
Jacklin, Constance	062544-21	At end of suspension license shall be placed on Probation - 1 yr	8/16/2012	
Fernald, Tina	042695-24	Probation w/restrictions and conditions 2 years	8/16/2012	Violating the Nurse Practice Act including being convicted for forgery, a felony, that relates adversely to the practice of nursing or to the ability to practice nursing.
Marshall, Wendi	018163-24	Voluntary Surrender	8/16/2012	
Perez, Nina	014208-22	Voluntary Surrender	8/29/2012	
Davey, Gina	040296-21	Reinstated w/restrictions & conditions 1 yr	9/20/2012	
Adams, Andrea	034304-24	Probation w/conditions & Restrictions 1 yr	9/20/2012	Positive drug test results for a drug for which she had no lawful prescription.

**On-Line Disclaimer**

State of New Hampshire Web sites may contain links to or data from other, non-State Web sites. When linking to another site, this State of New Hampshire Privacy Notice no longer applies. The State of New Hampshire does not endorse any products or services linked from or supplied to this site. In addition, some State agencies may have policies specific to their agency that augment or supersede this policy.

While the State of New Hampshire's Web sites are intended to provide current and accurate information, neither the State nor any of its employees, agencies, and officers can warranty the information contained on the site and shall not be held liable for any losses caused on the reliance of information provided. Relying on information contained on these sites is done at one's own risk.